

CHAPTER 54-03.2-06 CURRICULUM

Section

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54-03.2-06-01. General curriculum. The curriculum must:

1. Be planned, implemented, and evaluated by the faculty with provisions for student input;
2. Reflect the mission and purpose of the nursing education program;
3. Be organized and sequenced to meet the program outcomes;
4. Require a number of credits consistent with other programs at the same degree level;
5. Facilitate articulation for upward mobility;
6. Have a syllabus for each nursing course; and
7. Have written, measurable program outcomes, which include student learning outcomes that reflect the role and scope of practice for which the graduate is being prepared.

History: Effective November 1, 1996; amended effective April 1, 2004; July 1, 2008; April 1, 2011.

General Authority: NDCC 43-12.1-17

Law Implemented: NDCC 43-12.1-17(1)

54-03.2-06-02. Programmatic changes. Major programmatic changes must be submitted to the board for approval prior to implementation.

History: Effective November 1, 1996; amended effective April 1, 2004.

General Authority: NDCC 43-12.1-17

Law Implemented: NDCC 43-12.1-17(1)

54-03.2-06-03. Practice sites. The program shall have:

1. Current written agreements with cooperating sites; and

2. A student to faculty ratio no greater than eight to one for beginning nursing students in clinical areas involving direct client care.

History: Effective November 1, 1996; amended effective April 1, 2004.

General Authority: NDCC 43-12.1-17

Law Implemented: NDCC 43-12.1-17(1)

54-03.2-06-04. Practical nurse curriculum. Repealed effective April 1, 2004.

54-03.2-06-05. Registered nurse curriculum. Repealed effective April 1, 2004.

54-03.2-06-06. Graduate program curriculum. Repealed effective April 1, 2004.

54-03.2-06-07. Nursing education program curriculum. The curriculum of the nursing education program must assure the development of evidence-based clinical judgement, and skills in clinical management for the level, scope, and standards of nursing practice. The program outcomes must reflect the scope of practice and level of licensure sought as defined in chapters 54-05-01, 54-05-02, and 54-05-03.1.

1. The curriculum of all practical nurse programs must include:
 - a. Content regarding biological, physical, social, and behavioral sciences and legal and ethical responsibilities for practical nursing practice;
 - b. Nursing process concepts;
 - c. Communication and documentation skills;
 - d. Pharmacologic concepts and medication administration;
 - e. Nutritional concepts;
 - f. Theory and clinical experience related to health promotion and disease prevention for individual clients across the lifespan and in a variety of clinical settings, including basic safety and infection control;
9. Learning experiences that promote client-centered care that:
 - (1) Involves clients in decisionmaking, self-care, and healthy lifestyles;
 - (2) Respects client differences, values, preferences, and expressed needs; and

- (3) Is based on scientific evidence;
 - h. Learning experiences that promote supervision skills and socialization consistent with role and scope of practice and:
 - (1) Promotes functioning as a part of an interdisciplinary team; and
 - (2) Supervised clinical practice that includes management and care of groups of clients and delegation and supervision of unlicensed assistive persons;
 - i. Sufficient practice experiences to assure the development of nursing competencies of the specific role and scope; and
 - j. Learning experiences and methods of instruction which are consistent with the written curriculum plan.
2. Additional requirements for associate degree practical nurse programs include:
- a. Historical trends in nursing;
 - b. Theory and clinical experience related to section 54-05-01-06 relating to role of the licensed practical nurse intravenous therapy;
 - c. Data collection skills;
 - d. Use of available health information:
 - (1) Contributing to plan of care and care implementation; and
 - (2) Computer literacy;
 - e. Management skills; and
 - f. Courses that meet the sponsoring institution's general education requirements for the associate degree.
3. The curriculum of an associate degree program leading to registered nurse licensure must include content and sufficient clinical experience to prepare the graduate to:
- a. Deliver client-centered care that respects client differences, values, preferences, and expressed needs and is based on scientific evidence:
 - (1) Biological, physical, social, and behavioral sciences, including disease process, nutrition, and pharmacology;

- (2) Content regarding legal, ethical responsibilities and historical trends in nursing;
 - (3) Nursing process;
 - (4) Written, verbal, and therapeutic communication;
 - (5) Basic decisionmaking skills;
 - (6) Data collection skills to obtain obvious information; and
 - (7) Health promotion and maintenance for the individual and families.
- b. Function effectively in an interdisciplinary team:
- (1) Group dynamics;
 - (2) Goal-setting strategies; and
 - (3) Management concepts, including delegation and supervision of other members of the health care team.
- c. Deliver evidence-based practice, including application of evidence in managing common clinical problems.
- d. Apply quality improvement concepts in nursing care:
- (1) Basic safety and infection control standards; and
 - (2) Quality improvement processes.
- e. Use available health information:
- (1) Documentation of care plan, nursing care implementation, and evaluation of care provided; and
 - (2) Computer literacy.
- f. Inform and counsel patients and families:
- (1) Concepts of informational readiness;
 - (2) Discharge planning; and
 - (3) Implementation of preestablished patient teaching plans.
- g. Demonstrate nursing values and roles consistent with the scope of practice:

- (1) Registered nurse standards of practice; and
 - (2) Ethical concepts.
- h. Courses that meet the sponsoring institution's general education requirements for the associate degree.
- 4. The curriculum of a baccalaureate nurse program or a direct entry, prelicensure graduate program must include:
 - a. Content regarding legal and ethical issues; history, trends, and theories in nursing; biological, physical, social, and behavioral sciences, including pharmacotherapy; nutritional therapy; and pathophysiology;
 - b. Nursing process;
 - c. Didactic instruction and clinical experience in health promotion, prevention, restoration, and maintenance of clients across the lifespan and in a variety of clinical settings:
 - (1) Communicate, manage knowledge, and support decisionmaking using information technology; and
 - (2) Provide client-centered care that:
 - (a) Respects client differences, values, preferences, and expressed needs;
 - (b) Involves clients in decisionmaking and care management;
 - (c) Coordinates an interdisciplinary team to cooperate, collaborate, communicate, and integrate client care and health promotion;
 - (d) Employs evidence-based practice to integrate best research with clinical expertise and client values for optimal care; and
 - (e) Applies quality improvement processes:
 - [1] Quality improvement theory;
 - [2] Measurement of quality in terms of structure, process, and client outcomes; and
 - [3] Participation in development of changes in processes through utilization of change theory

and systems of care with the objective of improving quality;

- d. Experiences that promote the development of leadership and management skills and professional socialization:
 - (1) Responsibilities as a member of the profession;
 - (2) Management and leadership;
 - (3) Group dynamics and group leadership skills; and
 - (4) Systems and organizational theory;
 - e. Learning experiences and clinical practice to include management and care of groups of clients and delegation and supervision of health care providers:
 - (1) Infection control and safety;
 - (2) Quality and safety;
 - (3) Public or community health; and
 - (4) Case management;
 - f. Sufficient practice experiences to assure the development of nursing competencies to:
 - (1) Provide development of client-centered care;
 - (2) Provide opportunities to participate in interdisciplinary teams;
 - (3) Utilize or integrate research with clinical experience;
 - (4) Apply the principles of quality improvement; and
 - (5) Utilize technology and information management;
 - g. Learning experiences and methods of instruction must be consistent with the written curriculum plan; and
 - h. Courses that meet the sponsoring institution's general education requirements for the degree.
5. The curriculum preparing for licensure as an advanced practice registered nurse must include content and sufficient experience from nursing and related academic disciplines to meet requirements for a graduate degree with a nursing focus:

- a. The curriculum must prepare the graduate to practice:
 - (1) One of the following four identified advanced practice registered nursing roles as a certified registered nurse anesthetist, certified nurse midwife, clinical nurse specialist, and certified nurse practitioner; and
 - (2) At least one of the following six population foci: family individual across the lifespan, adult-gerontology, neonatal, pediatrics, women's health, or gender-related or psychiatric mental health.
- b. The curriculum shall include separate graduate level courses in the following:
 - (1) An advanced practice nursing core, including legal, ethical, and professional responsibilities of the advanced practice registered nurse.
 - (2) Advanced physiology and pathophysiology, including general principles that apply across the lifespan.
 - (3) Advanced health assessment, including assessment of all human systems, advanced assessment techniques, concepts, and approaches.
 - (4) Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.
- c. Each instructional track or major shall have supervised clinical experience that is directly related to the role and population foci, including pharmacotherapeutic management of patients.
 - (1) A preceptor for an advanced practice registered nurse student must be a licensed practitioner with graduate level preparation with comparable practice focus.
 - (2) Clinical supervision must be congruent with current national professional organizations and nursing accrediting body standards applicable to the advance practice registered nurse role and population focus.
- d. The curriculum must include the following:
 - (1) Preparation that provides a basic understanding of the principles for decisionmaking in the identified role.

- (2) Provisions for the recognition of prior learning and advanced placement for individuals who hold a master's degree in nursing and are seeking preparation in a different role and population foci.
 - (3) Preparation in a speciality area of practice is optional, but if included, must build on the advanced practice registered nurse role and competencies in at least one of the six population foci.
 - (4) Courses to meet the sponsoring institution's requirements for a graduate degree.
 - (5) Additional required components of graduate education programs preparing advanced practice registered nurses as determined by the board.
- e. Post-master's nursing students shall complete the requirements of the master's advanced practice registered nurse program through a formal graduate level certificate in the desired role and population foci and must demonstrate the same advanced practice registered nurses outcome competencies as the master's level student.
- 6. Delivery of instruction by distance education methods must meet the standards for nursing education according to article 54-03.2, be congruent with the nursing program curriculum plan, and enable students to meet the goals, competencies, and objectives of the education program and standards of the board.
 - 7. Distance nursing education prelicensure programs provided in this state must meet the standards for nursing education according to article 54-03.2, and must apply for board recognition prior to clinical placement of students.

History: Effective April 1, 2004; amended effective August 1, 2005; July 1, 2008; April 1, 2011; April 1, 2014.

General Authority: NDCC 43-12.1-17

Law Implemented: NDCC 43-12.1-17